Welcome Class of 2025!

In early July, 32 medical students, comprising the 17th class of the Cleveland Clinic Lerner College of Medicine, joined the Cleveland Clinic family. Naturally new student orientation in the era of COVID-19 looked different. Held jointly with the Case Western Reserve University School of Medicine University Program students, orientation was a blend of mostly online and limited in-person sessions. Despite a curtailed physical experience, orientation fulfilled the requirements necessary to prepare students to embark on their academic career, and the optional experiences, most of which were virtual and involved incoming students from both the University and College programs, increased the excitement and spirit of camaraderie.

continued >>>

Photo credit: Cory Chevalier, MD
Monday, July 6

All students tuned in for the virtual Dean’s Welcome by CWRU SOM Dean Stan Gerson, MD. New Vice Dean Lia Logio, MD, along with the deans for Admissions, Curriculum and Student Affairs addressed the students. Margaret McKenzie, MD, Associate Professor of Ob/Gyn & Reproductive Biology, delivered this year’s keynote address, sharing lessons she learned along the way and her best advice, including to always remember why they chose this profession over all others.

Next, the CCLCM students met at the Lerner Building for a short introduction to Student Affairs. The students were greeted by Christine Warren, MD, MS ('09), Clinical Assistant Professor of Medicine, Liz Myers, MEd, Karen Wright and Darlene Gray. There the students received their CCLCM lab coats and parking assignments, and had their ID badge photos taken. To maintain safety, each student followed a specified appointment time, and groups were limited to no more than eight students.

After lunch on their own, the CCLCM students headed over to the Health Education Campus, where they were welcomed by Executive Dean Bud Isaacson, MD, Professor of Medicine, and Dr. Warren. Linda Graham, MD, Professor of Surgery, gave the “Welcome to the Profession” presentation to CCLCM students. Students were presented with a gift book, “On Being a Doctor,” edited by Christine Laine, MD, MPH, and Michael LaCombe, MD.

Tuesday, July 7

All incoming students engaged in a virtual presentation about financial aid; study skills and time management; and campus safety. Jennifer Kriegler, MD, Associate Professor of Medicine, delivered a virtual presentation on the physician advisors, and Trine Jorgensen, PhD, Assistant Professor of Molecular Medicine, virtually oriented the first group of students to the research preceptors, with some students meeting their preceptor in person afterward.

Dr. Mehta virtually presented the second half of the computer orientation, called “Time and attention: How to be happy and organized in the digital age,” introducing the students to tips and tricks to stay efficiently organized. Some students met with their physician advisor in person afterward. Later that evening, all incoming students had the option of a movie night or a virtual fitness class or virtual game night.

Here’s a summary of the orientation activities and a little bit about each:
In the morning, CCLCM students were introduced to dual degree options via a virtual presentation by Christine Moravec, PhD, Assistant Professor of Molecular Medicine, followed by a virtual presentation on the foundations of molecular medicine by Alana Majors, PhD, Assistant Professor of Molecular Medicine. Dr. Jorgensen then virtually oriented the second group of students to their research preceptors. CCLCM students engaged in a study skills and self-management session with clinical psychologist Scott Bea, PsyD, Assistant Professor of Medicine.

During the lunch hour, students were virtually oriented to Journal Club with Christopher Hine, PhD, Assistant Professor of Molecular Medicine, followed by a virtual presentation on diversity and inclusion with Monica Yepes-Rios, MD, Associate Professor of Medicine and Director of Diversity and Inclusion, and Jazmine Sutton, MD (’12), Associate Director of Diversity and Inclusion. Beth Bierer, PhD, Associate Professor of Medicine, wrapped up the afternoon presentations with a virtual session on program evaluation and informed consent.

A highlight of this year’s orientation was a walking tour of University Circle. The incoming class was divided into eight groups of four. Led by upperclassmen, each group went on a two-hour walking tour, making four stops along the two-mile route: One-to-One Fitness, Severance Hall, Wade Oval and A7 Café, an ice cream shop. The tour leaders talked about the history and significance of some of the stops, such as Severance Hall being the home of the Cleveland Orchestra and where the White Coat and graduation ceremonies typically are held. Each group began in a different location to maintain physical distancing.

“The event was a fun, casual way for the students to get to know University Circle, each other and some of the upperclassmen,” says Maeve Pascoe (’24), one of the tour leaders. In addition to Maeve, the tour leaders included Salam Bachour (’22), Kate Lowe (’24), Precious Oyem (’24), Magda Rainey (’24), Matt Thompson (’24), Phil Wang (’24) and Alexia Zagouras (’22).

Later that evening, all incoming students again had the option of a movie night or a virtual fitness class or virtual game night.
Welcome Class of 2025! 

**Thursday, July 9**
The morning began with a virtual wellness session, presented by Cory Chevalier, MD, Assistant Professor of Medicine and Director of Wellness for CCLCM; Anjali Kala, LISW, a behavioral health outpatient therapist; and Dr. Warren. Following a virtual icebreaker activity, Dr. Warren gave the students a preview of the oath writing workshop. Afterward, all incoming students were virtually introduced to CWRU’s LGBT Center.

During lunch, Dr. Mehta virtually presented the third session of computer orientation, with a Q&A featuring a panel of year two students. Dr. Warren closed the afternoon sessions with a virtual review of the student handbook. That evening, all incoming students had the option of participating in the virtual Medical Student Talent Show.

**Friday, July 10**
All incoming students attended a virtual professionalism workshop and then broke out into small groups to discuss various aspects of professionalism and write their Oath of Professionalism (see sidebar on page 6). Afterward, CCLCM students met at the Alumni White Mansion to pick up a boxed lunch, student survival guide and their gift of an engraved stethoscope (see page 7). In the afternoon, all incoming students met virtually again for an introduction to student organization groups and a group hangout.

**Saturday, July 11**
All incoming students had the opportunity to attend the Cleveland Museum of Art.

**Sunday, July 12**
All incoming students gathered on Freiberger Field, outside of Tinkham Veale University Center on the CWRU campus, for a socially distant White Coat Ceremony, where CCLCM students received their white Cleveland Clinic coats and all stood to read their Oath of Professionalism together. James Young, MD, Professor of Medicine and Chief Academic Officer at Cleveland Clinic, delivered the address.
Welcome Class of 2025! continued
OATH OF PROFESSIONALISM 2020

We, the entering class of 2020, acknowledge that we are starting our medical careers at a pivotal time. In light of this, we pledge to act as scientists, clinicians and — above all — humanists. We will foster equitable relationships through fairness and understanding. We will meet vulnerability with respect, empathy, and sensitivity.

We pledge to embrace the unique identities of our patients. We will practice cultural humility and inclusivity. We will empower them to be active agents in their care.

We pledge to practice self-reflection, to challenge biases and strive for mastery. We recognize that to take care of others, we must take care of ourselves.

We pledge ourselves to lifelong learning. We will innovate, investigate, and improve evidence-based medicine. We will identify our strengths and limitations, creating a collaborative environment among healthcare professions.

We pledge to use our white coats to amplify marginalized voices and root out discrimination. We will be transparent and acknowledge our profession's history to earn our patients’ trust. We will combat inequalities and inequities in healthcare.

We draw inspiration from these turbulent times to fight for social justice. Our commitment to medicine extends beyond the White Coat.

ABOUT THE CLASS OF 2025

Our newest students possess rich experiences and varied interests. While most have majored in the sciences, some have majored or minored in mathematics; gender and women’s studies; global health; economics; and language.

Members of the class have studied or volunteered in more than 60 countries around the world, including the Bahamas, China, Costa Rica, Denmark, Dominican Republic, Ecuador, Ghana, India, Italy, Korea, Netherlands, Nigeria, Saudi Arabia, Singapore, Tanzania and United Kingdom.

As is typical of all our students, all members of the incoming class have served as tutors, mentors, teachers or coaches. They have held a total of 84 leadership positions. They have volunteered in at least 73 healthcare activities and 89 community activities outside of healthcare.

All the students have worked on notable research. They’ve earned 141 awards, grants and scholarships. They have been involved in 79 oral presentations and have 78 scientific publications to their credit.

Our students have engaged in interesting experiences including skydiving, cliff jumping in Spain, living in a Swiss monastery for five weeks, backpacking across Patagonia, hiking in the mountains of western Ireland, singing the national anthem for the greater Seattle area’s professional women’s soccer team and bungee jumping off a bridge in South Africa.

This new class of students has engaged in traditional sports, such as running, tennis, soccer, along with some unusual sports, such as inner-tube water polo and competitive ballroom dance. Music and dance play a large role in the lives of our new students. Several are singers and musicians, including those who play the piano, clarinet, flute, guitar, violin and trombone. Many students practice dance, including classical ballet, Afrobeat, hip-hop, jazz, modern and Indian styles.

Collectively, the students speak 14 languages, including Chinese, French, German, Hindi, Igbo, Korean, Spanish, Twi and Yoruba.

Our new students are interested in a wide variety of research topics including drug delivery; vaccine development; vascular tissue engineering; stem cell heart failure therapy; amyotrophic lateral sclerosis (ALS); neuroimmunology; breast cancer research involving nano-particle design; COVID-19 stem cell trials; HIV treatment; and many, many more.

Please give a warm welcome to the class of 2025!
Welcome Class of 2025! continued

SUPPORT THE FUTURE OF MEDICINE, SPONSOR A STETHOSCOPE FOR A STUDENT

JOIN US IN CONTINUING THE TRADITION

The class of 2018 began a new tradition of partnering with the Alumni Association to gift each student a personalized stethoscope. Help us continue this tradition of welcoming students by making a gift to support a stethoscope for a student.

To sponsor a stethoscope for a student, please visit give.ccf.org/stethoscopesforstudents.

Thanks to sponsorship from Cleveland Clinic’s Alumni Association and Cleveland Clinic Lerner College of Medicine (CCLCM) Class of 2018, the class of 2023 received a personalized stethoscope upon starting their journey at CCLCM. Students were taken aback by this warm welcome and generosity.
Welcome Class of 2025!

Helena Baffoe-Bonnie
Emory University, BS, Biology

Madeleine Blazel
University of Wisconsin-Madison, BS, Molecular Biology

Christopher (Chris) Cantrell
Harvard University, BA, Human Developmental and Regenerative Biology

Lydia Cassard
New York University, BA, Mathematics

Jamie DeCicco
University of North Carolina at Chapel Hill, BS, Psychology

Radhika Duggal
Case Western Reserve University, BA, Biochemistry; MA, Bioethics and Medical Humanities

Jesse Fajnzylber
Amherst College, BA, Chemistry

Cong (Ava) Fan
Cornell University, BA, Biology and Anthropology

Kevin Fung
Case Western Reserve University, BS, Biology

Thomas (Tommy) Gautier
Cornell University, BA Physics; MEng, Engineering Physics

Brady Greene
Northeastern University, BS, Chemistry

Jakub Jarmula
University of Pennsylvania, BA, Biology

Jessica Johnson
University of Washington, BS, Biomedical Engineering

Julia Joo
Univ. of Washington, BS, Biochemistry, and Molecular, Cellular and Developmental Biology

Jessica (Jess) MacWilliams
Emory University, BS, Biology and Spanish

Seth Meade
Case Western Reserve University, BS, Biomedical Engineering
Welcome Class of 2025! continued

Jameson Mitchell
Washington U. in St. Louis, BA, Philosophy-Neuroscience-Psychology and Spanish; Columbia University, Postbac Premed Program

Sekinat Mumuney
Mercer University, BS, Biomedical Engineering

Monica Nair
University of Rochester, BS, Computational Biology

Joseph (Joe) O’Brien
Middlebury College, BA, Molecular Biology and Biochemistry

Chineme (Chichi) Onwubueke
Northeastern University, BS, Biochemistry

William (Will) Patterson
Brown University, BS, Translational Epidemiology

Joseph (Carter) Powers
Vanderbilt University, BA, Molecular and Cellular Biology

Nityam Rathi
University of Pittsburgh, BS, Biological Sciences

Oluwapeyibomi (Peyi) Runsewe
University of Maryland-College Park, BS, Biomedical Engineering

Saswat Sahoo
University of Michigan-Ann Arbor, BS, Biomedical Engineering

Rachel Schafer
Kenyon College, BA, Molecular Biology

Priya Shukla
University of Maryland-College Park, BS, Biological Sciences: Physiology and Neurobiology

Abigail (Abby) Snyder
University of Pittsburgh, BS, Bioengineering

Elizabeth (Liz) Stanley
Princeton University, BSE, Chemical and Biological Engineering

Erin Sullivan
University of Notre Dame, BS, Neuroscience and Behavior

Mihika Thapliyal
Case Western Reserve University, BA, Cognitive Science, MA, Bioethics and Medical Humanities
Early encounters with patients help students thrive

In this issue of InSight, we introduce you to our new class of students, the class of 2025. We are delighted to welcome these 32 exceptional young people to the CCLCM and Cleveland Clinic families and look forward to guiding them as well as bearing witness to their accomplishments and professional growth in their journey to become outstanding physician investigators.

One of the most successful methods for preparing our students for a career in medicine is the longitudinal clinic, which they are introduced to in the fall of their first year. Few medical schools offer such a highly structured clinical experience so early — during years 1 and 2 — in the students’ academic career. We’ve found that this early experience with patients, integrated with our outstanding clinical skills program (communication skills led by Julie Rish, PhD, Assistant Professor of Medicine, and Tim Gilligan, MD, Associate Professor of Medicine, and physical diagnosis led by Venk Kambhamampati, MD, Assistant Professor of Medicine), prepares students very well for their core clerkship rotations during their third year.

We appreciate all the faculty who serve as preceptors in the longitudinal clinic and for the tremendous support the program (and all our clinical programs) receives from our administrative team. I encourage you to read more about the longitudinal clinic, along with a few student perspectives, on page 11.

We owe much gratitude to Dr. Mark Mayer, Associate Professor of Medicine, who started the longitudinal clinic the same year we enrolled the first class of students, in 2004, and served as its director until he retired this year. Mark is the quintessential educator, and we’re grateful that he is staying on in retirement, helping with the transition of the longitudinal clinic to Dr. Eric Yudelevich, Assistant Professor of Medicine, and overseeing the healthcare systems curriculum. I invite you to read more about Mark’s career and involvement with the longitudinal clinic on page 15. Finally, please join me in thanking him for his exemplary service to CCLCM and our students.

Bud Isaacson, MD
Executive Dean
LONGITUDINAL CLINIC:
A model system for real-world clinical learning

For many of our medical students, the most rewarding part of their early education at CCLCM is their participation in the longitudinal clinic (LC). Alissa Becerril (’23) recalls an LC patient who came in with chest pain. Alissa was prepared, clinically, to consider the source of the pain: “It could be musculoskeletal, pulmonary or cardiac,” she says. As the patient explained the situation, Alissa uncovered a multitude of layers to the story and a long, tragic history that involved chronic disease, alcohol abuse, murder and suicide.

“When I left the room, I felt like I carried more than just the information that was pertinent for clinical decision making,” she says. “I came out with more questions about empathy and questions about the role of the doctor in helping patients.

“How do I empathize with someone whose world is so different from my own? In the end, I think I can be humbled and grateful for the world that I live in and do my best to be present in the patients’ worlds that collide with mine as they pass by on their own trajectory. I realize that maybe empathy is less about understanding, and more about suspending judgment, listening and about trying to figure out the best way to be useful,” she says.

Alissa says that the entire LC experience helped remind her that medicine is more than simply diagnosing and managing diseases. Even more than helping her to develop clinical reasoning skills and foundational medical knowledge, her participation in LC allowed her to see what the “art and practice” of medicine looked like outside the pages of a communication skills textbook.

“I might not ever be able to write a prescription for a ‘new family’ or a ‘different financial situation,’ but I can celebrate the small successes of what I can do, like ordering a chest X-ray and cultivating a humble curiosity as I listen to someone’s story,” she says.

The value of longitudinal patient care cannot be overstated. Matt Russell (’23) says that by seeing the same patients over the course of two years, he was able to build bonds with them. “Hearing phrases like ‘I remember you!’ or just seeing a smiling familiar face made this experience much more valuable for me,” he says. “Rather than treating patients and sending them on their way in a one-
off approach, I found out what it was like to be able to be there for a patient, through their highs and lows.”

Salam Bachour (‘22) appreciated the opportunity to work with patients early and over two years, taking care of the same patients multiple times during his LC experience. During Salam’s outpatient internal medicine rotation, he cared for some of the same patients he’d seen in the longitudinal clinic. “It felt like a ‘traditional’ PCP visit, where I already knew the patient and had established a great relationship that enabled me to solely focus on their care at that visit,” he says.

**UNIQUE FORMALIZED TRAINING**

The longitudinal clinic was started in 2004 and has been led by Mark Mayer, MD, Associate Professor of Medicine, around the premise that it is crucial to give students broad-based clinical experience with actual patients early in their training. Not many other medical schools offer this same type of formalized training. “I longed to have a program where first- and second-year students got involved in clinical experience. I thought the one-on-one relationship students would form with patients was essential,” says Dr. Mayer. “One of major objectives was for the students to develop strong, professional doctoring skills.”

Starting in year 1, students are assigned to work with a preceptor, a primary care (internal medicine or family medicine) physician, who will work with them for two years. The students engage in half-day longitudinal care sessions with their preceptor every other week, with a good dose of observation and feedback built in. They develop communication, history-taking and physical examination skills with patients, then oral presentation skills. In year 2, the longitudinal care sessions increase to weekly. Additional communication and exam skills are developed, and the focus includes development of clinical reasoning skills.

Students practice skill building with standardized patients as well. For example, they might practice patient-centered communication and heart examination with a standardized patient one week. During the following week, they reinforce those same skills with real patients in the longitudinal clinic. In year 2, there are more LC sessions than standardized patient sessions, as the array of presentations, cases and reflective practice grows apace.

“By the time students finish their second year, they’ve had 100-plus interactions with patients, and they are well-equipped to start their third year with broad-based clinical experience,” says Dr. Mayer, who has retired from his full-time clinical and teaching duties, including his role as an LC preceptor, as of June 30 (see “Dr. Mark Mayer retires, named Emeritus Faculty,” page 15). He is staying on at CCLCM as Emeritus Faculty and currently helping Eric Yudelevich, MD, Assistant Professor of Medicine, transition to his new role as director of the LC.
MENTORSHIP IS KEY

Students highly value the mentorship component of the LC, in addition to seeing the same patients over the course of two years. During his third-year outpatient internal medicine rotation, Salam continued to work with his LC preceptor, Dr. Yudelevich, which he regards as the best part of his LC experience.

"By having continuity in our education, our LC preceptors are able to see us evolve as student physicians and provide both verbal and written feedback weekly, but, more importantly, cumulative feedback over time," says Salam. He also highly values the foundation of trust that is built between the preceptor and student, which, for Salam, drove him to work harder and take on more responsibilities within his scope of practice.

HIGHLY RATED PROGRAM

“The mentoring relationship Dr. Mayer and I had was perhaps my favorite part of LC,” says Matt. “Every week, we would discuss the coursework. He would then ask me about my learning goals for the session, so I would have targeted areas for improvement on a weekly basis. He did a superb job of making my LC a place where I could feel safe improving my skills and asking for help when needed.”

“Mark helped get the longitudinal clinic started and helped make it a success,” says Craig Nielsen, MD, Associate Professor of Medicine, Assistant Dean of Clinical Education and an LC preceptor. “The longitudinal clinic is a great way for students to learn from the very beginning what it takes to be a physician and how to effectively communicate with patients,” adding that the LC traditionally is the highest rated component of years 1 and 2 for students.

Students aren’t alone in rating the program favorably. In a survey of CCLCM faculty that Dr. Mayer conducted, the vast majority reported that their favorite activity was longitudinal teaching. Part of the reason for this high rate of satisfaction is Cleveland Clinic’s mission to support education, which isn’t shared to the same extent by many other medical institutions, and commitment to support faculty in both their teaching time and development.

Similarly, patients report satisfaction in working with medical students. Dr. Mayer and colleagues conducted a study of main campus and Solon Family Health Center LC patients. Among the positive comments was that many patients felt they spent more time with their doctor (they included the time spent with the medical student) and were able to communicate more of their concerns and medical history. About a fifth of patients felt they played a special role by contributing to the students’ education.

“One of the greatest advantages of the LC is the improvement in our communication skills with patients,” says Salam. “LC allows us to practice our patient education skills, motivational interviewing and presenting the plan for future care across a litany of disease states. Regardless of which specialty a student goes into, these skills serve as a transferrable foundation that has prepared us for our future as physicians,” he says.

Alissa feels likewise. “Amidst the at-times-overwhelming grind of medical student demands, going to LC helped remind me about the reason that the work is a privilege. It got me excited to go back to the books, to go and learn more about what I had seen in clinic. It got me excited about the profession that I am lucky enough to begin to practice.”

continued >>
COVID-19 CHANGES THE GAME

Dr. Yudelevich, who joined Cleveland Clinic in 2017, is keen to ensure that the core elements of the LC remain the same and to continue to shape the experience for students by exploring and incorporating their feedback, something that Dr. Mayer was well known for doing. In the meantime, the LC could look a little different for the next few months because of concerns around COVID-19 and patient contact, particularly because some internal medicine/family medicine patients are elderly and have a high risk of complications from COVID-19.

“We will try to find more opportunities for students to practice physical diagnosis, understanding that they won't have the normal venues to practice in. Students will likely have more virtual visits than ever before. Participating in virtual visits is an interesting skill that hasn't been practiced much in the past. I'm confident it will be an interesting and positive experience for students,” says Dr. Yudelevich.

If so, check out a new microsite that catalogues how CCLCM students and faculty rose to the challenge during the pandemic, from bringing courses online and modifying the curriculum to helping neighbors get much-needed resources and developing an emergency ventilator. The site also features a timeline that juxtaposes the CCLCM response with major national and local news related to COVID-19.

We hope that by aggregating our many accomplishments, you will get a sense for the magnitude of our collective response and feel proud to be a member of the CCLCM family.
Dr. Mark Mayer retires, named Emeritus Faculty

Having retired from full-time clinical practice and teaching as of June 30, Mark Mayer, MD, Associate Professor of Medicine, will continue to serve CCLCM as Emeritus Faculty, overseeing the healthcare systems curriculum, which comprises topics such as healthcare policy, healthcare economics, health equity and social determinants of health.

Dr. Mayer has enjoyed an illustrious career at Cleveland Clinic, having joined the staff in 1991 to practice internal medicine. An educator at heart, he has served on several education committees and acted as Internal Medicine Grand Rounds Co-Director or Director for more than a dozen years. From the very start, Dr. Mayer involved himself in teaching both residents and medical students, serving as a preceptor for internal medicine residents in longitudinal care clinics until this year, and serving as a preceptor for third- and fourth-year medical students in the inpatient internal medicine setting until 2012 and in the ambulatory internal medicine setting until this year.

In 2004, Dr. Mayer was appointed as an Associate Professor of Medicine with CCLCM and started the longitudinal clinic for first- and second-year students, serving as its director until this year, when Eric Yudelevich, MD, Assistant Professor of Medicine, takes the reins. In addition to starting the longitudinal clinic, Dr. Mayer served as a preceptor and was deeply involved in training faculty to serve as preceptors, generally facilitating four to six faculty development sessions annually.

In 2013, Dr. Mayer began leading the healthcare systems curriculum, helping to develop competency standards and assessment tools. He introduced many quality and patient safety-related projects for the third-year students as well as competencies to the curriculum. He also helped develop reflective writing assignments for first- through third-year students to allow them to better connect social and healthcare influences with health justice and equity.

Of his many accomplishments, Dr. Mayer is most proud of “creating and nurturing the longitudinal clinic. The LC has served a great need, and it was a unique opportunity for CCLCM and Cleveland Clinic to adopt it,” he says. A close second, he says, is his involvement — and getting his students involved — in healthcare systems and advocacy. Since the 1990s, Dr. Mayer has routinely met with congressional representatives to discuss topics such as healthcare policy and universal healthcare coverage. He traveled to Washington, DC, annually for the American College of Physicians (ACP) Leadership Days, where he would meet with members of Congress. Increasingly, he got medical students and residents involved in advocacy. “Now, two to three students or residents for every Cleveland Clinic doctor attend Leadership Days,” he says.

Over the years, Dr. Mayer has contributed to 20 policy papers developed by the ACP Health and Public Policy Committee, of which he was a member, on topics such as controlling healthcare costs, improving regulation of prescription drugs, racial and ethnic disparities in healthcare, and the shortage of primary care physicians.

In addition to winning two CWRU School of Medicine Scholarship in Teaching Awards this year — one for Health Systems Science in the Clerkship: Application to Patient Care, and the other for A Longitudinal Ambulatory Block: Facilitating Medical Student Individual Learning Goals and Progressive Responsibility in Patient Care — Dr. Mayer has been the recipient of many awards including the CCLCM Kaiser Award for Clinical Teaching (2012), Cleveland Clinic Medicine Institute Educator of the Year Award (2015), Cleveland Clinic Internal Medicine Department Ockner Clinician Educator Award (2015), and Best Doctors in America from 2002 to 2020. He also was inducted as a Fellow into the CWRU School of Medicine’s Academy of Scholar Educators in 2017.

“Cleveland Clinic has given me huge opportunities that I don’t think would have existed anywhere else,” he says.
Cleveland Clinic and CWRU to host first 2020 U.S. presidential debate

The debate is scheduled to take place within the Sheila and Eric Samson Pavilion of the Health Education Campus on Sept. 29.

“We are honored to host this presidential debate at our shared Health Education Campus,” Cleveland Clinic CEO and President Tom Mihaljevic, MD, and Case Western Reserve University President Barbara R. Snyder said in a joint statement. “This pandemic has highlighted the critical importance of health care and scientific discovery in unprecedented ways. To have the presidential candidates discuss these issues in our innovative learning space represents a tremendous opportunity for both institutions – and our entire region.”

Students and faculty are assured that the ongoing needs of student education within the building as well as patient care on main campus will not be compromised as we plan for the debate.

Read the entire article.

Your vote matters

Whether you have just moved to the Cleveland area or have been here a while, you want to be sure you’re eligible to vote.

Already registered? It’s worth double checking because Ohio has been purging its voter rolls, and some consistent voters have accidentally gotten caught up in this process. Visit VOTEOHIO.gov and check the status of your registration. It’s easy and takes less than one minute.

Need to register to vote? To vote in Ohio you must:

• register at least 30 days before Election Day
• be a citizen of the United States
• be at least 18 years old on or before the next general election
• be a resident of Ohio for at least 30 days before the election

See the ID requirements and either register online or via paper. Get details.

Need to update your voter registration? Update your information online. Get details.

Know the deadlines, and don’t procrastinate You must register or update your voter registration no later than 30 days prior to an election. For the general election on Nov. 3, register or update your registration by Oct. 5!

Want to vote by mail? This is the safest way to vote. Request a vote-by-mail (VBM) ballot (aka absentee ballot) as soon as you are registered. Allow about 15 minutes to complete the form. No errors are tolerated, so complete the form carefully. If you vote by mail, the most secure way of returning your ballot is to drop it off at the Board of Elections (BOE) downtown via secure drop box. You can track your ballot online to know that your ballot was received. Get details about voting by mail.

Prefer to vote in person?

• Vote early: This is the second-safest way to vote. You have the option of voting early in person at your Board of Elections starting on Oct. 6.
• Vote on Nov. 3: If you decide to vote in person at your local precinct on Election Day, check your polling location first as some may change or be consolidated. Also, be sure to wear a mask and maintain physical distance while waiting in line.

Finally, please encourage your family members, friends and colleagues to vote!
Student receives G.E.R.M. award

Congratulations to Zheyi Han ('21) for being selected to receive a Grants for Emerging Researcher/Clinician Mentorship Program (G.E.R.M.) award from the Infectious Diseases Society of America Foundation and HIV Medicine Association for his thesis project, the title of which is “Impact of Clostridioides difficile Infection on Patient Quality of Life.”

Zheyi’s mentor is Abhishek Deshpande, MD, PhD, Assistant Professor of Medicine.

The G.E.R.M. award includes a complimentary IDSA/HIVMA one-year membership along with a cash award.

35 CCLCM faculty members promoted

Faculty in CCLCM who are Assistant Professors or Associate Professors and want to advance must go through a year-and-a-half promotion cycle. Congratulations to the following faculty members who were recently promoted, effective July 2020:

- Mohamed Abazeed, MD, PhD
  Associate Professor, Medicine

- Bahar Bassiri Gharb, MD, PhD
  Associate Professor, Surgery

- Andrei Brateanu, MD
  Associate Professor, Medicine

- J. Mark Brown, PhD
  Associate Professor, Molecular Medicine

- Patrick Collier, MD, PhD
  Associate Professor, Medicine

- Claudiu Cotta, MD, PhD
  Associate Professor, Pathology
35 CCLCM faculty members promoted continued

Ursula Galway, MD
Associate Professor, Anesthesiology

Aaron Gerds, MD
Associate Professor, Medicine

Fatema Ghasia, MD
Associate Professor, Ophthalmology

J. Harry Isaacson, MD
Professor, Medicine

Christine Jellis, MD, PhD
Associate Professor, Medicine

Ankur Kalra, MD
Associate Professor, Medicine

Sumita Khatri, MD
Professor, Medicine

Deborah Kwon, MD
Associate Professor, Medicine

Michael Lioudis, MD
Associate Professor, Medicine

Michael Manos, PhD
Associate Professor, Pediatrics

Claudio Milstein, PhD
Professor, Otolaryngology - Head & Neck Surgery

Alireza Mohammad Mohammad, MD
Associate Professor, Neurological Surgery
35 CCLCM faculty members promoted continued
The importance of seeking faculty promotion cannot be overstated. Seeking a promotion demonstrates not only a faculty member’s dedication to teaching, research and clinical service, but also a commitment to their career and engagement at Cleveland Clinic.

The class of 35 staff members who took the time to attain this promotion should be applauded. Thank you for the service you provide in developing future physician investigators!

FACULTY: If you wish to be promoted, visit the CCLCM Faculty Affairs Promotions page to learn more. All applications are submitted online via our portal. Applications for the next cycle begin this fall and must be submitted before the Jan. 31, 2021, deadline, which is earlier than the CWRU deadline for their faculty promotions.